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B22A (Official Form 22A) (Chapter 7) (12/10)

| In re Kum L  | ok Chia    |   |
|--------------|------------|---|
|              | Debtor(s)  | According to the information required to be entered on this statement |
| Case Number: | 13-50209   | (check one box as directed in Part I, III, or VI of this statement):  |
|              | (If known) | ☐ The presumption arises.   |
|              |            | ■ The presumption does not arise.                                     |
|              |            | ☐ The presumption is temporarily inapplicable.                        |

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

|   | Part I. MILITARY AND NON-CONSUMER DEBTORS   |  |  |  |  |
|---|---|--|--|--|--|
| 1A  | Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.                        |  |  |  |  |
|   | □ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)). |  |  |  |  |
| 1B  | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.   |  |  |  |  |
|   | ☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.  |  |  |  |  |
| Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumpt temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion per are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your before your exclusion period ends. |   |  |  |  |  |
| 1C  | Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard  |  |  |  |  |
|   | a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and ☐ I remain on active duty /or/ ☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;   |  |  |  |  |
|   | OR  |  |  |  |  |
|   | b.   I am performing homeland defense activity for a period of at least 90 days /or/  I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.  |  |  |  |  |

|    | Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(   | 7) I         | EXCLUSION                 | ſ  |                                |  |
|----|--|--------------|---------------------------|----|--------------------------------|--|
| 2  | <ul> <li>Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.</li> <li>a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.</li> <li>b. □ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11.</li> </ul> |              |                           |    |                                |  |
|    | <ul> <li>c. ■ Married, not filing jointly, without the declaration of separate households set out in Line 2. ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</li> <li>d. □ Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("</li> </ul>   |              | _                         |    |                                |  |
|    | All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.  |              | Column A  Debtor's Income |    | Column B<br>Spouse's<br>Income |  |
| 3  | Gross wages, salary, tips, bonuses, overtime, commissions.   | \$           | 0.00                      | \$ | 1,359.00                       |  |
| 4  | Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.  |              |                           |    |                                |  |
|    | a. Gross receipts \$ 0.00 \$ 0.00 b. Ordinary and necessary business expenses \$ 0.00 \$ 0.00 c. Business income Subtract Line b from Line a   | \$           | 0.00                      | \$ | 0.00                           |  |
| 5  | Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.    Debtor   Spouse  |              |                           |    |                                |  |
|    | b. Ordinary and necessary operating expenses \$ 0.00 \$ 0.00 c. Rent and other real property income Subtract Line b from Line a  | \$           | 0.00                      | \$ | 0.00                           |  |
| 6  | Interest, dividends, and royalties.  | \$           | 0.00                      |    | 0.00                           |  |
| 7  | Pension and retirement income.   | \$           | 0.00                      |    | 0.00                           |  |
| 8  | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.   | \$           | 0.00                      |    | 0.00                           |  |
| 9  | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to  |              |                           |    |                                |  |
|    | be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00   | \$           | 0.00                      | \$ | 0.00                           |  |
| 10 | Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse   |              |                           |    |                                |  |
|    | a.     \$       b.     \$  |              |                           |    |                                |  |
|    | Total and enter on Line 10   | \$           | 0.00                      | \$ | 0.00                           |  |
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).  | <del>-</del> | 0.00                      |    | 1,359.00                       |  |

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| 12 | Total Current Monthly Income for § 70 Column A to Line 11, Column B, and enter the amount from Line 11, Column A.  |                                 |   |                                   |      | 1,359.00         |
|----|--|---------------------------------|---|-----------------------------------|------|------------------|
|    | Part III. A  | PPLICAT                         | ION OF § 707(b)(7) EXCLUSIO   | N                                 |      |                  |
| 13 | Annualized Current Monthly Income for enter the result.  | or § 707(b)(7)                  | . Multiply the amount from Line 12 by th  | e number 12 and                   | \$   | 16,308.00        |
| 14 | Applicable median family income. Enter (This information is available by family si   | the median faze at www.us       | amily income for the applicable state and I doj.gov/ust/ or from the clerk of the bankr | nousehold size.<br>ruptcy court.) |      |                  |
|    | a. Enter debtor's state of residence:  | NC                              | b. Enter debtor's household size:   | 22                                | . \$ | 50,762.00        |
| 15 | Application of Section 707(b)(7). Check  ■ The amount on Line 13 is less than of top of page 1 of this statement, and co  □ The amount on Line 13 is more than | r equal to the<br>mplete Part V | e amount on Line 14. Check the box for 'I', do not complete Parts IV, V, VI or V        | II.                               |      | ot arise" at the |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

|   | Complete Part   | 8 1 V , V , V 1, and V 11 ( | or uns            | statement only if required.                  | (See Time 12.)   |    |
|---|---|-----------------------------|-------------------|--|------------------|----|
|   | Part IV. CALCULA  | ATION OF CUR                | RENT              | MONTHLY INCOM                                | IE FOR § 707(b)( | 2) |
| 16 Enter the amount from Line 12.   |   |                             |                   |  |                  | \$ |
| Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.  a.  b.  c.  d.  Total and enter on Line 17 |   |                             |                   |  | \$               |    |
| 18  | Current monthly income for § 70   | 7(b)(2). Subtract Line      | 2 17 fro          | m Line 16 and enter the resu                 | ılt.             | \$ |
|   | Part V. C.  | ALCULATION (                | OF DI             | EDUCTIONS FROM                               | INCOME           |    |
|   | <u>-</u>  |                             |                   | s of the Internal Revenu                     | ·                |    |
| National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.  |   |                             |                   | \$   |                  |    |
| 1913  | National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom |                             |                   |  |                  |    |
|   | Persons under 65 year   |                             |                   | Persons 65 years of age Allowance per person | or older         |    |
|   | a1. Allowance per person b1. Number of persons c1. Subtotal   |                             | a2.<br>b2.<br>c2. | Number of persons Subtotal                   |                  | \$ |
| Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.  |   |                             | \$                |  |                  |    |

| 20B | Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your count available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy or the number that would currently be allowed as exemptions on your fed any additional dependents whom you support); enter on Line b the tota debts secured by your home, as stated in Line 42; subtract Line b from not enter an amount less than zero.  [a.] IRS Housing and Utilities Standards; mortgage/rental expense  |  |    |  |  |
|-----|---|--|----|--|--|
|     | a. IRS Housing and Utilities Standards; mortgage/rental expense b. Average Monthly Payment for any debts secured by your  | \$   |    |  |  |
|     | home, if any, as stated in Line 42  | \$   |    |  |  |
|     | c. Net mortgage/rental expense  | Subtract Line b from Line a.                 | \$ |  |  |
| 21  | Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entit Standards, enter any additional amount to which you contend you are contention in the space below:  | led under the IRS Housing and Utilities      | \$ |  |  |
|     | Local Standards: transportation; vehicle operation/public transports You are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expense.  | whether you pay the expenses of operating a  |    |  |  |
| 22A | included as a contribution to your household expenses in Line 8.  | es of for without the operating expenses are |    |  |  |
|     | ☐ 0 ☐ 1 ☐ 2 or more.  If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards:  Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)   |  |    |  |  |
| 22B | Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that you public transportation expenses, enter on Line 22B the "Public Transtandards: Transportation. (This amount is available at <a href="https://www.usdoj.go/court.">www.usdoj.go/court.</a> )  | \$   |    |  |  |
| 23  | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  1 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter |  |    |  |  |
|     | the result in Line 23. Do not enter an amount less than zero.   | \$   |    |  |  |
|     | a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle   | ·P   |    |  |  |
|     | b. 1, as stated in Line 42  | \$   |    |  |  |
|     | c. Net ownership/lease expense for Vehicle 1  | Subtract Line b from Line a.                 | \$ |  |  |
| 24  | Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Line the result in Line 24. Do not enter an amount less than zero.  [a.] IRS Transportation Standards, Ownership Costs  |  |    |  |  |
|     | Average Monthly Payment for any debts secured by Vehicle  | \$   |    |  |  |
|     | b. 2, as stated in Line 42  | \$   |    |  |  |
|     | c. Net ownership/lease expense for Vehicle 2  | Subtract Line b from Line a.                 | \$ |  |  |
| 25  | Other Necessary Expenses: taxes. Enter the total average monthly ex state and local taxes, other than real estate and sales taxes, such as income   | \$   |    |  |  |
|     | security taxes, and Medicare taxes. Do not include real estate or sales taxes.  |  |    |  |  |

| 26                                      | Other Necessary Expenses: involuntary deductions for endeductions that are required for your employment, such as re Do not include discretionary amounts, such as voluntary  | \$   |    |
|---|--|--|----|
| 27                                      | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  |  |    |
| 28                                      | Other Necessary Expenses: court-ordered payments. Ent pay pursuant to the order of a court or administrative agency include payments on past due obligations included in Line  | , such as spousal or child support payments. Do not    | \$ |
| 29                                      | Other Necessary Expenses: education for employment or<br>the total average monthly amount that you actually expend for<br>education that is required for a physically or mentally challed<br>providing similar services is available.  | or education that is a condition of employment and for | \$ |
| 30                                      | Other Necessary Expenses: childcare. Enter the total avera childcare - such as baby-sitting, day care, nursery and presch  |  | \$ |
| 31                                      | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.       |  |    |
| 32                                      | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. |  |    |
| 33                                      | Total Expenses Allowed under IRS Standards. Enter the  | total of Lines 19 through 32.                          | \$ |
| *************************************** | Health Insurance, Disability Insurance, and Health Savin the categories set out in lines a-c below that are reasonably n dependents.   |  |    |
| 34                                      | a. Health Insurance \$   |  |    |
|   | b. Disability Insurance \$   |  |    |
|   | c. Health Savings Account \$   |  | \$ |
|   |  |  |    |
| 35                                      | Continued contributions to the care of household or famile expenses that you will continue to pay for the reasonable and ill, or disabled member of your household or member of your expenses.   | \$   |    |
| 36                                      | Protection against family violence. Enter the total average reasonably necessary monthly expenses that you   |  |    |
| 37                                      | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  |  |    |
| 38                                      | Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary   |  |    |
|   |  |  |    |

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.  |                |  |  |  |
|----|---|----------------|--|--|--|
| 40 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).  | cash or        |  |  |  |
| 41 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40  | \$             |  |  |  |
|    | Subpart C: Deductions for Debt Payment  |                |  |  |  |
| 42 | Future payments on secured claims. For each of your debts that is secured by an interest in property that yown, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of a amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.   | ll<br>ne       |  |  |  |
|    | Name of Creditor Property Securing the Debt Average Monthly Payment include to or insura  | axes<br>nce?   |  |  |  |
|    | a.   \$   □yes □1    Total: Add Lines   | \$             |  |  |  |
| 43 | motor vehicle, or other property necessary for your support or the support of your dependents, you may incl your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amout the following chart. If necessary, list additional entries on a separate page.  Name of Creditor  Property Securing the Debt  1/60th of the Cure Ar   | any<br>ints in |  |  |  |
|    | a. \$   |                |  |  |  |
| 44 | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.  |                |  |  |  |
| 45 | Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the follo chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.  a. Projected average monthly Chapter 13 plan payment.  b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  c. Average monthly administrative expense of Chapter 13 case  Total: Multiply Lines a and b | wing \$        |  |  |  |
| 46 | Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.  | \$             |  |  |  |
|    | Subpart D: Total Deductions from Income   |                |  |  |  |
| 47 | Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.   | \$             |  |  |  |
|    | Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION   |                |  |  |  |
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2))  | \$             |  |  |  |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))   | \$             |  |  |  |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.  | \$             |  |  |  |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and entresult.  | ter the \$     |  |  |  |

|      | Initial presumption determination. Check the applicable box and proceed as directed.  |   |                                       |  |  |  |
|------|---|---|---------------------------------------|--|--|--|
| 52   | ☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.           |   |                                       |  |  |  |
| , 32 | ☐ The amount set forth on Line 51 is more than \$11,725* Ch statement, and complete the verification in Part VIII. You may a  |   |                                       |  |  |  |
|      | ☐ The amount on Line 51 is at least \$7,025*, but not more th   | an \$11,725*. Complete the remainder of Part V      | I (Lines 53 through 55).              |  |  |  |
| 53   | Enter the amount of your total non-priority unsecured debt  |   | \$                                    |  |  |  |
| 54   | Threshold debt payment amount. Multiply the amount in Line  | 53 by the number 0.25 and enter the result.         | \$                                    |  |  |  |
|      | Secondary presumption determination. Check the applicable b   | ox and proceed as directed.                         |                                       |  |  |  |
| 55   | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.  |   |                                       |  |  |  |
|      | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. |   |                                       |  |  |  |
|      | Part VII. ADDITIONAL  | L EXPENSE CLAIMS                                    |                                       |  |  |  |
| 56   | Other Expenses. List and describe any monthly expenses, not of you and your family and that you contend should be an additional 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate item. Total the expenses.        | I deduction from your current monthly income        | under §                               |  |  |  |
|      | Expense Description   | Monthly An  | nount                                 |  |  |  |
|      | a.  | \$  |                                       |  |  |  |
|      | b.  | \$  |                                       |  |  |  |
|      | C.  | \$  |                                       |  |  |  |
|      | d. Total: Add Lines a   | b, c, and d \$                                      |                                       |  |  |  |
|      |   |   | · · · · · · · · · · · · · · · · · · · |  |  |  |
|      | Part VIII. VEI  | <b>UFICATION</b>                                    | ****                                  |  |  |  |
|      | I declare under penalty of perjury that the information provided i  | n this statement is true and correct. (If this is a | joint case, both debtors              |  |  |  |
|      | must sign.) Date: March 14, 2013  | Signature: Isl Kum Lok Chia                         |                                       |  |  |  |
| 57   | 1740. ITALO11 17, 2010  | Kum Lok Chia  |                                       |  |  |  |
|      |   | (Debtor)  |                                       |  |  |  |

<sup>\*</sup> Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment,